PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed wh appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590

12/28/2004

Doyle B. Johnson CROSBY, HEAFEY, ROACH & MAY P.O. Box 7936 San Francisco, CA 94120-7936

09697203 03/14/2005 EHAILE2 00000037 502603



Note: A certificate of mailing can only be used for domestic mailings of Fee(s) Transmittal. This certificate cannot be used for any other accompany papers. Each additional paper, such as an assignment or formal drawing, m have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the Un States Postal Service with sufficient postage for first class mail in an envel addressed to the Mail Stop ISSUE FEE address above, or being facsim transmitted to the USPTO (703) 746-4000, on the date indicated below.

Norma E	Gillespie /	(Depositor's na
Morma	E. Gilder	(Signat
March 8,	2005	(D

1 FC:1501 1400.0	na na		L	IIIII	Z. Gillall	<u>C</u> (*********
	OO DA			March 8	, 2005	(D
APPLICATION NO.	FILING DATE	FIR	ST NAMED INVENT	OR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/697,203	10/26/2000		Lester J. Kozlowski		24096.00500	3715
TITLE OF INVENTION: CO	OMPACT ACTIVE PIXEL	WITH LOW-NOISE	IMAGE FORMAT	ON		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUE	LICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$0	\$1400	03/28/2005
EXAM	INER	ART UNIT	CLA	SS-SUBCLASS		
YE,	LIN	2615		348-308000		
Change of correspondence address or indication of "Fee Address" (37 FR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered attorney or agent) and the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents. If no name is listed, no name will be printed.						
PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGNI	37 CFR 3.11. Completion	clow, no assignee date of this form is NOT a	a will appear on the substitute for filing	e patent. If an assi an assignment. and STATE OR C	ignee is identified below, the COUNTRY) ks, California	
Please check the appropriate	assignee category or catego			🗖 Individual 🚨	Corporation or other private g	roup entity Governm
la. The following fee(s) are	enclosed:		ayment of Fee(s):			
Issue Fee		_	A check in the amo			
	mall entity discount permitte		Payment by credit			P.
XXAdvance Order - # of	Copies	<u> </u>	Ine Director is he eposit Account Num	reby authorized by ber <u> 5 0 – 2 6 0</u>	charge the required fee(s), or 0.3 (enclose an extra	r credit any overpayment copy of this form).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other part interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature Date 39,240 **J**ohnson

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to proc an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to comp this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 14 Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

5. Change in Entity Status (from status indicated above)

Typed or printed name

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

Registration No.

PTO/SB/17 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2002 °

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

6)	1	.430

Complete if Known					
Application Number	09/697,203				
Filing Date	October 26, 2000				
First Named Inventor	Lester J. Kozlowski				
Examiner Name	Ye, Lin				
Group / Art Unit	2615				
Attorney Docket No.	354096 00500				

METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)									
☐ Check ☐ Credit card ☐ Money ☐ Other ☐ None				DITIONAL		Entite :						
Order Deposit Account:			<u>Large</u>		Small I	Entity						
					Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid		
I Deposit I				105	130	205	65	Surcharge - late filing fee or oath				
Num							127	50	227	25	Surcharge - late provisional filing fee or cover sheet.	
Depo	osit						139	130	139	130	Non-English specification	
Acco		REED SM	ITH CR	OSBY HEAFE	Y LLP		147	2,520	147	2,520	For filing a request for reexamination	
Name The Commissioner is authorized to: (check all that apply)						112	920*	1 2	920*	Requesting publication of SIR prior to Examiner action		
☐ Charge fee(s) indicated below ☐ Credit any overpayments ☐ Charge any additional fee(s) during the pendency of this application					113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action			
☐ Char	ge fee(s) i	ndicated be	low, e	xcept for the	e filing fee		115	110	2 5	55	Extension for reply within first month	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. FEE CALCULATION					116	400	2 6	200	Extension for reply within second month			
	BASIC FIL	INC FEE			•		117	920	2 7	460	Extension for reply within third month	
Large E	tity	Small Entity	•				118	1,440	2 8	720	Extension for reply within fourth month	
Fee Code		ee Fee ode (\$)	<u>Fe</u>	e Description		Paid	128	1,960	228	980	Extension for reply within fifth month	
101	1.,	01 370	1 ():	tility filing fee			119	320	2 9	160	Notice of Appeal	
106		06 165		esign filing fee	. —		120	320	220	160	Filing a brief in support of an appeal	
107		07 255	_	Plant filing fee		121	280	221	140	Request for oral hearing		
108	08 740 208 370 Reissue filing fee		138	1,510	138	1,510	Petition to institute a public use proceeding					
114	160 2	14 80	Pr	rovisional fillin	g tee		140	110	240	55	Petition to revive - unavoidable	
l		SUBT	OTAL (11)	(\$) 0	1	141	1,280	241	640	Petition to revive - unintentional	
			,				142	1,280	242	640	Utility issue fee (or reissue)	1,400
2. EXT	RA CLAIM	FEES					143	460	243	230	Design issue fee	
						Fee Paid	144	620	244	310	Plant issue fee	
Total Clain	ns [¬	= (0	122	130	122	130	Petitions to the Commissioner	
Independer		=	늗				123	50	123	50	Processing fee under 37 CFR 1.17 (q)	
Claims	"	**	= (<u> </u>		0	126	180	126	180	Submission of Information Disclosure Stmt	8
Multiple Dependent				. x	= [0	581	40	581	40	Recording each patent assignment per property (times number of	
Large Er		Small E					146	740	ماد	270	properties)	
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Descri			146	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
103	18	203	9	Claims in e			149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
102	84	202	42	•	nt claims in exces							
104	280	204	140		pendent claim, if i independent clair		179	740	2/79	370	Request for Continued Examination (RCE)	
109	84	209	42	original pat	ent		169 900 169 900 Request for expedited examination of a design application					
110	18	210	9	over origina	claims in excess al patent	or zo anu	Other fe	ee (specif	fy) A <u>d</u> va	nce Pate	ent Order (10)	30
SUBTOTAL (2) (\$) 0												
**07.000	mbor orev	iouely paid	if are:	ater: For Reis	sues see abov		*Reduc	ced by Ba	asic Filin	g Fee P	aid SUBTOTAL (3) (\$) 1,4	130

SUBMITTED BY Complete (if applicable)									
Name (Print/Type)	Doyle B. Johnson	Registration No. Attorney/Agent) 39,240		Telephone	415-659-5969				
Signature	hall B	h		Date	March 8, 2005				

WARNING Information on/mis form may become public. Credit card information should not be Included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231.

DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.